

**UTILITY PATENT APPLICATION TRANSMITTAL**

(New Nonprovisional Applications Under 37 CFR § 1.53(b))

Attorney Docket No.

020.0340.US.CON22141 U.S. PTO  
10/646274

08/22/03

**TO THE ASSISTANT COMMISSIONER FOR PATENTS:**

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, Gust H. Bardy, entitled System And Method For Diagnosing And Monitoring Myocardial Ischemia For Automated Remote Patient Care, for a(n):

( ) Original Patent Application.

(X) Continuing Application (prior application not abandoned):

(X) Continuation ( ) Divisional ( ) Continuation-in-part (CIP)

of prior application No: 10/116,654 filed on: 4/4/2002, a continuation  
of U.S. Patent No. 6,368,284, issued on 4/9/2002.

(X) A statement claiming priority under 35 USC § 120 has been added to the specification.

**22895**

PATENT TRADEMARK OFFICE

Enclosed are:

(X) Specification; 59 Total Pages. (X) Drawing(s); 31 Total Sheets.

(X) Oath or Declaration:

(X) A Newly Executed Combined Declaration and Power of Attorney:

(X) Signed. ( ) Unsigned. ( ) Partially Signed.

( ) A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).

( ) Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the  
oath or declaration is supplied, is considered as being part of the disclosure of the accompanying  
application and is hereby incorporated herein by reference.

( ) Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).

(X) Formal Drawing Transmittal Letter.

(X) Return Receipt Postcard.

( ) Associate Power of Attorney.

(X) A Check of \$ 2,424.00 for the Filing Fee.

( ) Preliminary Amendment.

(X) Information Disclosure Statement and Form PTO-1449.

(X) A Duplicate Copy of this Form for Processing Fee Against Deposit Account.

(X) Fee Transmittal Sheet

( ) Applicant claims small entity status.

( ) Other: \_\_\_\_\_

CLAIMS AS FILED				
FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Claims	85	65	\$18.00	\$1,170.00
Independent Claims	9	6	\$84.00	\$ 504.00
Multiple Dependent Claims (if applicable)				\$0.00
Assignment Recording Fee				\$0.00
Basic Filing Fee				\$750.00
Total Filing Fee				\$2,424.00

Charge \$ \_\_\_\_\_ to Deposit Account 501144 pursuant to 37 CFR § 1.25. At any time during the pendency of this application, please charge any fees required or credit any overpayment to this Deposit Account.

Respectfully submitted,

By: \_\_\_\_\_

Patrick J.S. Inouye, Esq., Attorney of Record  
Reg. No. 40297

Date: August 22, 2003

Correspondence Address:

Law Offices of Patrick J.S. Inouye  
810 Third Avenue Suite 258  
Seattle, WA 98104  
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Fax: (206) 381-3999

I hereby certify that this is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR § 1.10 on the date indicated below and is addressed to:

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By: \_\_\_\_\_

Typed Name: Larissa V. Pigott

Express Mail Label No.: EV317784447US

Date of Deposit: August 22, 2003

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="font-size: small; margin: 5px 0;">Effective 01/01/2003. Patent fees are subject to annual revision.</p>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Application Number	
		Unassigned	
		Filing Date	
		August 22, 2003	
		First Named Inventor	
		Bardy	
Examiner Name		Unassigned	
Art Unit		Unassigned	
TOTAL AMOUNT OF PAYMENT		(\$) <b>2,424</b>	
		Attorney Docket No.	
		020.0340.US.CON	

<b>METHOD OF PAYMENT (check all that apply)</b>				<b>FEE CALCULATION (continued)</b>																																																																																																																																																																																					
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None  <input type="checkbox"/> Deposit Account Deposit Account Number: 501144 Deposit Account Name: Law Offices of Patrick J.S. Inouye  The Commissioner is authorized to: (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.				<b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>1,970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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<b>SUBMITTED BY</b>				<b>Complete (if applicable)</b>	
Name (Print/Type)		Patrick J.S. Inouye, Esq.		Registration No.	
				(Attorney/Agent)	
Signature				40297	
				Telephone	
				(206) 381-3900	
				Date	
				August 22, 2003	

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This collection of information is required by 37 CFR 1.14 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, VA 2213-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Patent Application, PO Box 1450, Alexandria, VA 2213-1450.

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